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10/700,315

PTO/SB/08A (08-03)

Substitute for form 1449A/PTO		Complete If Known		
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)		Application Number		
		Filing Date		
		First Named Inventor	Schuster, Karl-Heinz	
		Art Unit		
		Examiner Name		
Sheet	1	of	Attorney Docket Number	021833-000300US

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Examiner Initials*	Cite No. ¹	Document Number		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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		Country Code ²	Number ⁴	Kind Code ³ (if known)				
SM	AU	JP	10089935A		4/1998			<input type="checkbox"/>
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	BA							<input type="checkbox"/>
	BB							<input type="checkbox"/>

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Examiner Signature		Date Considered	3/20/06
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